

## CLAIMS ONLY

Application Number

09/931,444

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	1								51			
2									52			
3									53			
4									54			
5									55			
6									56			
7									57			
8									58			
9									59			
10.	1								60			
11									61			
12									62			
13									63			
14									64			
15									65			
16									66			
17									67			
18									68			
19	1								69			
20									70			
21									71			
22									72			
23									73			
24									74			
25									75			
26									76			
27									77			
28									78			
29									79			
30									80			
31									81			
32									82			
33									83			
34									84			
35									85			
36									86			
37									87			
38									88			
39									89			
40									90			
41									91			
42									92			
43									93			
44									94			
45									95			
46									96			
47									97			
48									98			
49									99			
50									100			
Total Indep	20								Total Indep			
Total Depend.	3	←	←	←					Total Depend	←	←	←
Total Claims	23								Total Claims			